

Application Data Sheet

APPLICATION INFORMATION

Application Type:: Regular
Subject Matter:: Utility
Title:: Random Access High-Speed
Confocal Microscope

Attorney Docket Number:: 2310-00102
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 10
Small Entity?:: Yes

APPLICANT INFORMATION

Applicant Authority type:: Inventor
Primary Citizenship
Country:: Germany
Status:: Full Capacity
Given Name:: Peter
Family Name:: Saggau
Name Suffix::
City of Residence:: Houston
State or Province of Residence:: TX
Country of Residence:: US
Street of mailing address:: 5005 Yoakum
City of mailing address:: Houston
State or Province of
mailing address:: TX
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 77006

Applicant Authority type:: Inventor

Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	Vivek
Family Name::	Bansal
Name Suffix::	
City of Residence::	Houston
State or Province of Residence::	TX
Country of Residence::	US
Street of mailing address::	7617 Cambridge
City of mailing address::	Houston
State or Province of mailing address::	TX
Country of mailing address::	US
Postal or Zip Code of mailing address::	77054
Applicant Authority type::	Inventor
Primary Citizenship	
Country::	US
Status::	Full Capacity
Given Name::	Saamil
Family Name::	Patel
Name Suffix::	
City of Residence::	Houston
State or Province of Residence::	TX
Country of Residence::	US
Street of mailing address::	4818 East Laureldale
City of mailing address::	Houston
State or Province of mailing address::	TX
Country of mailing address::	US

Postal or Zip Code of
mailing address::

77041

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

23505

REPRESENTATIVE INFORMATION

Representative Customer Number::

23505

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2003/035441	10/22/03
PCT/US2003/035441	An application claiming the benefit under 35 USC 119(e)	60/420,379	10/22/02

ASSIGNEE INFORMATION

Assignee name::

Baylor College of Medicine

Street of mailing address::

One Baylor Plaza

City of mailing address::

Houston

State or Province of

mailing address::

TX

Country of mailing

address::

US

Postal or Zip Code of

mailing address::

77030

ASSIGNEE INFORMATION

Assignee name::	William Marsh Rice University
Street of mailing address::	6100 Main Street
City of mailing address::	Houston
State or Province of mailing address::	TX
Country of mailing address::	US
Postal or Zip Code of mailing address::	77005